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APPLICANTS

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** CONTINUING DATA *****
 None B.S.

** FOREIGN APPLICATIONS *****
 None B.S.

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged	STATE OR COUNTRY OR	SHEETS DRAWING 1	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3
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Examiner's Signature: *[Signature]* Initials: *[Initials]*

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TITLE
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